DOCUMENT RESUME

ED 369 490 PS 021 954

TITLE Family Reunification Project.
INSTITUTION Administration for Children, Youth, and Families (DHHS), Washington, D.C.
PUB DATE [91]
NOTE 17p.; For related documents, see PS 021 952-953.
PUB TYPE Reports - Descriptive (141)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Biological Parents; Community Services; *Family Counseling; *Foster Children; *Mental Health Workers; Program Descriptions; Program Development; Program Effectiveness; *Social Services
IDENTIFIERS *Family Reunification; Utah

ABSTRACT

Utah's Department of Human Services' Family Reunification Project was initiated to demonstrate that intensive, time-limited, home-based services would enable children in foster care to return to their natural families more rapidly than regular foster care management permits. The following steps were taken in project development: (1) sites were selected; (2) the research design and data collection instruments were developed to assess program effectiveness; (3) reunification workers were hired; (4) allied agencies and staff were informed about the project; (5) a steering committee developed the service model; and (6) reunification workers were trained. The project involved 57 children who received intensive reunification services and 47 control group cases. Of the experimental group, 52 were returned home within a 90-day period, compared to 12 of the control group. The service model included the following provisions: the reunification worker's caseload was limited to six families; services were limited to 90 days and were goal-oriented; workers spent an average of 35 hours in face-to-face contact with the families; the reunification worker was the primary therapist and liaison with community resources, as well as the caseworker; and services were family- rather than child-oriented. Success rates for family preservation will be determined in a 6-month follow-up. (AC)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED 369 490

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
X This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

Family Reunification Project

Abstract

Family Reunification Project, a project funded by the Administration on Children, Youth and Families of the U. S. Department of Health and Human Services, addressed the reunification of families after out-of-home placement. The final report presents an overview of the project and describes the intensive, time-limited, family-based strategy that the project employed. Project outcomes included a significantly higher number of reunifications of children in the study group than in the control group, which received standard foster care case management.

PS 02 354

For further information, please contact Jake Terpstra at (202) 205-8810, Children's Bureau of the Administration on Children, Youth and Families.

SECTION I

FINAL SUMMARY OF THE FAMILY REUNIFICATION PROJECT

PS 02 354

Need for Assistance:

The State of Utah's Department of Human Services has increasingly become aware of the powerful impact intensive family based services have had on preventing out-of-home placements. At the same time, it became apparent that children were staying in foster care much longer than necessary (14 months). This is due to foster care workers carrying a caseload of 20-30 children. Because of such a high caseload, foster care workers are unable to provide the type of counseling, or resources, that are necessary to enable a child to return to their family within a reasonable period of time (six to nine months).

With the increase of reported child abuse victims (47% increase from 1987 to 1989), there has been a concurrent increase in the number of children going into foster care. Although, through family preservation efforts, we believe the majority of children referred to Social Services are able to remain in their own homes. However, those children who are placed in foster care are coming from very dysfunctional multiproblem families where the children must be removed because of the imminent risk of abuse or neglect.

Current foster care practice is rarely family based because of the high caseloads and multiple systems that must be dealt with e.g., foster child/ren, foster family, natural family, extended family and the numerous governmental systems that play an important role in the foster child's life. Quite simply, there is not enough time for a foster care worker to become involved in the treatment and education that a family needs in order to reunite foster children with their families.

Because foster care workers are unable to provide direct services, foster children and their families are referred to local community resources to obtain the counseling and education that is required to return the child back to its natural environment. As these community resources are not as familiar with the complex multiproblem families that Social Services deals with, treatment is longer in duration and may not focus on the specific child protection issues that are required to be resolved in order to return the child home.

It was the Department's assumption that by providing intensive, time-limited, home-based services children would be able to return to their natural families in a much more timely manner than they are currently able to with the provision of regular foster care case management.

Objectives of the Project:

Objective I: The main objective of this project was to demonstrate that intensive home-based services are as effective in the reunification of children to their natural parents as in preventing unnecessary out-of-home placements.

It has been demonstrated that workers who used an intensive time-limited, family based approach to reunifying children to their natural families were significantly more effective than foster care workers who had a caseload of 20 to 30 cases and were case managers rather than treatment providers.

Sixty six children received intensive reunification services and another 66 children were identified as control group cases. All of these children were identified through a random sampling procedure. Several of these children and their families had to be dropped from the study due to the natural parents not being able to be located.

Of the 57 children that received intensive home-based services for the purpose of reunification (and the research componet of this project), 52 were returned home within a 90 day time period. Of the 47 children that were followed in this study that received regular foster care case managemement, 12 were returned home within the 90 day time frame.

Objective II: By using a time-limited, family based, intensive approach to reunification, children who are placed outside of their homes would remain in foster care only as long as it was necessary to reduce the risk elements that made it impossible for these children to remain in their own homes. Also, the state would see a reduction in the length of time a child remained in foster care and utilize those cost savings to enhance further reunification efforts.

The model that was used by reunification workers to accomplish this objective was as follows:

> The reunification worker was limited to working with no more than six families at any point in time;
>
> Services were time-limited (90 days), and were goal-oriented;
>
> Services were intensive. Workers would spend an average of 35 hours of face to face contact with the family during the 90 day episode;
>
> Treatment is provided in the home by the reunification worker. The reunification worker was the primary therapist, as well as the caseworker. Along with providing therapy, the worker was able to provide concrete services and is responsible to obtain the necessary community resources that would assist in the reunification and stabilization of the child in their natural home and
>
> Services are focused on the "family" rather than the foster child.

Foster care workers used "regular foster care case management" techniques which include referral to community mental health centers for mental health treatment, parent education training, etc., to alleviate the problems which were present when the child was removed from the home.

Because the reunification workers had a reduced caseload and provided intensive services, children were able to return home earlier, where under a regular foster care case load they would have had to remain in care much longer because the risk of harm could not be managed or monitored closely enough. Some children were referred to this project that workers thought would never be successful in returning home but felt the family had the right to at least one more try prior to finding a more permanent placement for that child. In several attempts reunification was successful. Where these

attempts were not successful in the reunification of the child to their natural parents, the foster care worker was provided with sufficient cause to petition the Juvenile Court for permanent deprivation.

Due to the success of this model, the Department of Human Services is going to continue to perform these intensive reunification services and will expand this service to other areas of the state.

Objective III - Project Methodology:

The project was carried out in three Social Service Offices (operational arm of the Division of Family Services), with five full time staff providing intensive reunification services. All staff received start up training with regards to psycho education skill building techniques, behavior modification techniques and techniques that relate to bonding and reunification.

Criteria for children being eligible for this project was developed by an "Intensive Reunification Project Steering Committee". Referral and eligibility criteria was established to meet research needs as well as ensuring that the service provided was assisting children to return home who would not otherwise be able too.

As mentioned previously, a model was developed from which workers would structure their efforts towards reunification. This included a "Special Needs Fund", where workers could assist families with concrete services in order to enhance the likelihood that a child may return to their natural parents.

The Utah Department of Human Services contracted with the University of Utah, Graduate School of Social Work, Behavioral Science Institute to collect program outcome data. Specifically, the data that was collected was focused on family demographics, what family characteristics were most likely to be predictors of success for this type of service, what clinical techniques were most successful in stabilizing and maintaining children in their own homes.

The research design was an experimental design with three and six month post testing.

Objective IV: To gather data to answer the following questions: (a) how effective is the intensive home-based model for reunifying families and reducing recidivism in foster care? (b) will intensive home-based services reduce the number of children in foster care as well as the length of stay? (c) are success rates equivalent using the same model for reunification and family preservation and (d) does the reunification program require some changes in the family preservation model used in prevention of out-of-home placements?

(a) As mentioned previously, the families who received intensive home-based services as their reunification program were able to be reunified 96% of the time, as compared to those that received foster care case management were able to be reunified 12% of the time.

(b) Using intensive home-based services to return children home from foster care will certainly reduce the amount of time a child is placed out of their home. However, with the increasing number of drug addicted parents whose children are entering the foster care system, the number of children coming into substitute care will most likely increase because of the imminent

risk of harm these children are faced with and the crisis their parents are dealing with. With the provision the intensive services, these parents will receive more help and resources than have previously existed, which will increase the likelihood their children can be returned home more quickly.

(c) Success rates for reunification and family preservation are equivalent for the 90 day treatment episode (in that children are able to be reunified and stabilized or prevention of an out-of-home placement has occured). Six month follow-ups will occur with the reunification families to determine how successful this approach is in maintaining these families together (these results will be finalized in May 1991 and submitted to the Department of Health and Human Services).

In conclusion, this project was very successful in proving that by using intensive home-based services to reunify children to their natural families, reunification can occur much more quickly than through the use of regular foster care case management services.

Staff who were identified to carry out this project will continue to provide intensive reunification services and will be funded by the state. It is anticipated that this service will be expanded to other areas of the state.

Attached is a more detailed report of the "Intensive Family Reunification Project" which will highlight project findings and will address more of the project details.

0746f

SECTION II

FINAL DETAILED REPORT OF PROJECT FINDINGS, ACTIVITIES AND EVALUATION

The Family Reunification Project became possible through a grant awarded by the Department of Health and Human Services to the Department of Human Services, Division of Family Services, State of Utah. The research project began February 1, 1989, and will terminate May 31, 1991. (The funding portion from the Department of Health and Human Services terminated November 30, 1990)

The purpose of this research project is to demonstrate that intensive home-based services are as effective in returning children home from substitute care as they are in the prevention of unnecessary substitute care placements. Intensive in-home services have proven to be effective in the prevention of unnecessary substitute care placements as demonstrated by evaluations conducted in Washington, Michigan and Utah. The next step is to expand and test the model for reunification.

Following the award of this grant it was felt that at least four months were necessary to accomplish the following objectives prior to initiating the project:

I. Site Selection: This project took place in three field offices in the Office of Social Services (the operational arm of the Division of Family Services). These sites were chosen on a voluntary basis and because they have sufficient foster care cases to fit the criteria for reunification in this research project. Those sites were the Kearns and Midvale offices in Salt Lake County and the Provo office in Utah County (both urban areas). Initially a rural office was participating in this project. However, after three months it was decided that such a small office was not able to refer sufficient families to the project, and its involvement was terminated.

II. Develop the Research Design and the Data Collection Instruments: The Division of Family Services contracted with the University of Utah, Graduate School of Social Work, Social Research Institute. The Social Research Institute agreed to assist with the design of the project, collecting the data, analyzing the data and provide a summary of the findings of the "Intensive Family Reunification Project".

Mark Fraser, Ph.D. and Peter Pecora, Ph.D. are co-principal investigators, and Elaine Walton, MSW, is the Research Assistant from the University of Utah, Graduate School of Social Work, Social Research Institute. Robert Lewis Ph.D. is the research coordinator from the Department of Human Services, who coordinated the data collection systems within the Department that assisted with this project.

Evaluation of the effectiveness of the project used an experimental and a control group. The research design that has been used with this project is a post-test only experimental design with a six month follow-up. Descriptive information was collected at the end of the 90 day service period for both the experimental and control groups. Data collected focused on factors associated with child placement and child reunification. This same type of information will be collected six months post termination of the 90 day episode.

The Social Research Institute developed or obtained the following instruments for the data collection in this research project:

To be completed by the natural parents of the child in the study:
Index of Parental Attitudes (Hudson)
Index of Self-esteem (Hudson)
Family Assessment Device (McMasters)

To be completed by the case worker:
Family Demographics (Social Research Institute)
Goal Checklist (Social Research Institute)
Case Termination: Worker Survey (Social Research Institute)
Worker Survey (Social Research Institute)

To be completed by children over the age of ten:
"Child Behavior Check List" (Achenbach).

An "Informed Consent" Form was developed for both the parents and children (over the age of six) involved in this project.

A random sampling procedure for case selection was developed by Robert Lewis. All foster care cases in the State of Utah are tracked by a statewide computer system. The data collected and retrained by this system includes both demographic and case planning information.

A computer printout (derived from the foster care data collection system) was run every month for each project site. One element that is kept for each child in this data base is the "Permanency Goal" for each child. The printout was designed to list by worker, all cases of foster children who had "Return Home" as their permanency goal.

Upon receipt of the computer list, foster care workers reviewed these cases with their supervisor to determine which cases could be referred to the reunification project and which cases were not eligible (eligibility criteria will be defined later on). After the eligibility determination was made, the foster care supervisors would return the list to the reunification workers who would tally up the total number of children identified as candidates for the project during that month. The reunification worker would then assign numbers to these families in chronological order. The reunification worker would then inform the project coordinator of the total number of cases identified that month. The same process was used in all subsequent cases.

A random sampling procedure was developed using the LOTUS computer programming system. The Coordinator entered the number of children who were eligible for such services and the program assigned each case a random number. Those cases identified with even numbers were assigned to be in the experimental group and all cases assigned an odd number were placed in the control group. The reunification worker would then begin with the number one experimental foster child randomly assigned on the list and prepare for reunification. Concurrently, the number one control case would be designated and evaluated during the same time period as the experimental case.

III. Hire the Reunification Workers: From the designated project sites, three reunification workers were converted from foster care positions and two new staff were hired for the project. These staff were hired/converted into these positions based on their interest in this project and their ability to provide a unique type of service to this population. A target date of July 1, 1989, was set to have these staff hired, trained, and ready to accept referrals.

IV. Inform Allied Agencies About the Project: Meetings were held with Juvenile Court Judges and Guardian Ad Litems to gain their support and input for the project. Foster parents in the respective counties (where the research project was taking place) were notified of the project by letter. Generally the other agencies who were also involved in these children's lives were very positive about the project. The agencies expressed appreciation that a service that has been proven to be successful in preventing unnecessary out-of-home placements will be used in returning children home from substitute care. Representatives of these agencies were particularly impressed by the number of hours the reunification worker would be spending with the foster child and their family.

V. Inform Foster Care Staff of the Project: The project coordinator met with all foster care supervisors and most foster care staff to discuss this project and address their concerns.

VI. Develop an "Intensive Family Reunification Project Steering Committee: The committee consisted of Peter Pecora (Social Research Institute), the reunification staff and their supervisors, foster care representatives and the project coordinator (Catherine Harlin). The steering committee assisted in the development of the model, the development of referral criteria for this project and visiting project sites to ensure the referral process was consistent in each site.

A. Develop a Model: A model was necessary from which the reunification worker could operate. The model established parameters as to how reunification staff would return children to their natural parents in an intensive, time-limited, goal-oriented framework.

The model that was utilized in this project for the experimental families was as follows:

1. The reunification worker was limited to working with no more than six families at any point in time.

2. Services are time limited (90 days maximum), services are behaviorally oriented and services are goal oriented.

3. Services are intensive. Workers spend an average of 35 hours of face to face contact with the family.

4. Treatment is provided in the home by the reunification worker. The reunification worker is the primary therapist and assumes the caseworker role for the families with whom they are working. The reunification worker also arranges for all concrete services that are necessary, networks and advocates for the family.

5. Reunification workers are available 24 hours a day, seven days a week to the families with who they are working.

6. Services are focused on the family rather than the foster child.

A special needs fund was available for workers to utilize with families who were in need of concrete services (i.e., housing, transportation, medical care etc.) and could not have their children returned home until such needs were met. A maximum of $500 could be spent per family. Any amount exceeding $500 required the project coordinator's approval.

The model that was utilized for families identified as control cases was the same that a foster care worker utilizes with a caseload of 25 to 30 families. The worker would be required to: see the foster child once per month; ensure their placement is stable and conducive to a normal pattern of growth and development; and assisting families in obtaining the necessary resources to enable the return of their child to their home. Typically these resources include menta; health counseling and parenting skill training.

Referral criteria that was developed by the steering committee specified the following:

1. Inclusion Criteria: The child has been in placement for 30 days or more; the case goal is to return the child home; the child is returning home from a structured setting such as a group home/ residential placement/inpatient hospitalization and requires intensive in-home services in order to return home. Although a parent may not be available for the child to return to, a relative that would be considered a permanent placement for the child would be an appropriate referral and children that do not appear on the monthly print out of potential candidates for the project may be added.

2. Exclusion Criteria: The child's safety is clearly at risk and cannot be managed in the home even with intensive in-home services; the child is progressing in a treatment program which needs to be completed; the child would be returning home within 30 days without the provision of intensive in-home services; the child has no parent or relative to return home to; the child is a member of the control group; the parents will not voluntarily agree to participate in the project and finally, the parent is in a treatment program outside the home and will not be available to have their child returned until they complete the program.

VI. Train the Reunification Workers: Two days of start up training was held in June 1989. Training topics included an overview of the HOMEBUILDER'S model and skill building techniques which dealt with communication, parenting, developmental and bonding issues. Family Preservation staff with four to five years of experience and a foster care supervisor conducted this training. In September 1989 workers received training from the National Resource Center for Family Based Services on Structural Family Therapy. In June of 1990 HOMEBUILDERS trained the workers on the psychoeducational model and in September 1990 the National Resource Center For Family Based Services trained the workers on Strategic Family Therapy skills.

From July 1, 1989 through September 1990 referrals were made to the reunification project. The course of treatment that has been described above was followed. At the termination of a case the worker completed instruments (which were described previously) were sent to the research assistant who would then schedule an interview with the family (both control group and experimental) to gather the family and child completed instruments.

At the conclusion of the time period that cases could be referred to this project (September 1990), 66 children were identified as experimental cases and received intensive in-home services for their return to their natural families. 66 children were identified as control cases. However, 28 children (both control and experimental groups) had to be withdrawn from the study as their natural parents could not be located for interviews or it was determined that they had been referred to the study and did not meet the eligibility criteria. A total of 57 experimental cases and 47 control cases were utilized for the purposes of this study.

Along with many difficulties that presented themselves in this research project, many awarenesses and positive experiences presented themselves.

At the start up of this project, one worker who was assigned to be a reunification worker was abducted. Another worker had emergency surgery and had to wait three months prior to taking any cases.

The most difficult obstacle in returning children home became the Guardian Ad Litem. He became very resistant in allowing children to return home, especially if parents were not making progress in their treatment plan.

As previously mentioned, a number of families had to be dropped from this research project as they did not meet the eligibility criteria. Most families that had to be excluded were due to the parents location being unknown. Although all the results or findings are not available, there were many more control group families that were not able to be located to complete the data collection instruments as compared to the experimental families. This certainly poses a major dilemma for foster care workers who are searching for permanence in a child's life. The transient lifestyle of many parents we work with make it often impossible to reunify a child.

One of the reunification workers (Max Park) felt it was imperative to return custody and guardianship of the child back to the natural parents concurrently with the child returning home. Mr. Park felt strongly about this issue for both legal and therapeutic purposes. This technique proved to be very successful in returning and maintaining the child in their own home, rather than waiting to return custody and guardianship to the parents the typical three to six month time period once the child had returned home. Another technique that he used in all his cases was to require a "celebration" of the family unit being together once again. Not focusing on the child but on the unity of the family. Also, Mr. Park had each family go through a values clarification exercise which again provided unity among family members as well as a feeling of belonging and understanding what was important for each person in the family. These techniques along with many reunification skills and rituals were presented by Max Park and his supervisor Heber Tippetts at the National Family Based Conference in Detroit, November 1990.

Some children were referred to this project in order to give the family one last try prior to looking at different alternatives for permanence for that child. Some of these children successfully returned home. For the children that were not returned home, the project made it possible, in some cases, to pursue a more permanent placement through permanent deprivation and adoption.

The most poignant observation I made through this project is the difficult job that foster care workers perform. With only the most difficult and serious cases being placed in substitute care, foster care workers have exceptionally high standards imposed upon them. They often have a caseload of 25 to 30 families and must coordinate all the services that the family must receive in

order to have the child(ren) returned home. Between complying with state and federal mandates and serving these troubled families, a foster care worker has an impossible job--which they handle remarkably well. As the project progressed, it became increasingly difficult to draw a significant pool of candidates who were eligible to receive these services as the foster care workers were returning children home as soon as it appeared possible, without the use of intensive in-home services.

This research project (although the information is preliminary) indicates that if a foster care worker had a manageable caseload of 15-20 cases, they would be able to reunify children with their parents in a much more timely process. If more workers could have their caseload at a maximum of six families with their primary focus on reunification, more children would have the benefit of returning home more quickly. Even though risk factors may be high, they can often be managed with intensive in-home services.

The following is preliminary data that was obtained from worker completed instruments. A final report will be forth coming from the Social Research Institute when all data has been analyzed, including the six month follow up surveys. That report will be completed in May 1991.

TABLE I

Hours spent by Caseworker Providing Intensive Reunification Services

Contacts	Mean Score
In-person contact hours (first two weeks)	7.1
Phone hours (first two weeks)	1.9
Other contact hours (first two weeks)	3.1
Total in-person contact hours	26.6
Total phone hours	7.9
Total other contact hours	9.6
Total hours providing transportation	3.3
Total hours providing concrete services	1.8
Total hours making referrals and helping family improve skills in obtaining concrete services	2.5
Total hours in 90-day period per case	63.9
Total hours spent per week per case	4.9

TABLE 2

Child's Gender by Group:

Sex	Frequency Experimental	Control
Male	21	28
Female	36	19
Total	57	47

TABLE 3

Family Structure by Group:

	Frequency	
	Experimental	Control
Birthparent Together	9	7
Single parent Divorced-Separated	30	21
Birthpa Steppar	6	8
Birthpa Other	6	5
Single Nevmar	2	3
Widow or Widower	4	2
Adoptive Parents	0	1
Total	57	47

TABLE 4

Gross Annual Family Income:

	Frequency	
	Experimental	Control
Under 5,000	9	13
5,001 - 10,000	21	7
10,001 - 15,000	12	9
15,001 - 20,000	5	6
20,001 - 25,000	6	4
25,001 - 30,000	1	5
Over 30,000	3	2
Total	57	47

TABLE 5

Child's Ethno-Cultural Background:

	Frequency	
	Experimental	Control
Asian	1	0
Black	2	3
Hispanic	2	3
Native American	2	2
White	48	37
Mixed Background	2	2
Total	57	47

TABLE 6

Primary Caretaker's Religion:

	Frequency Experimental	Control
LDS	38	26
Protestant	2	2
None	12	12
Other	3	4
Total	57	47

TABLE 7

Importance of Religion:

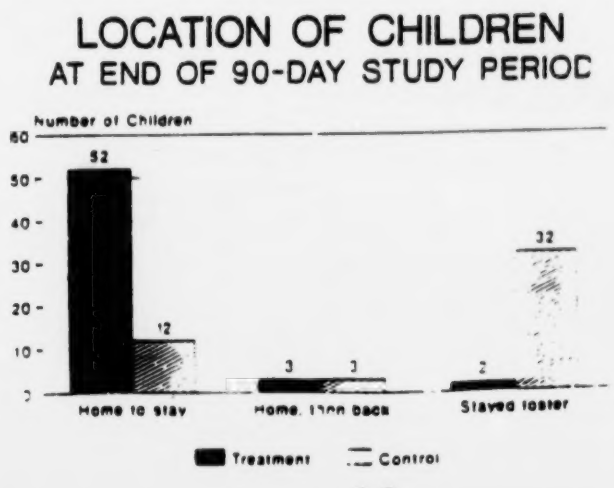
	Frequency Experimental	Control
Not Important	20	20
Unimportant	11	8
Important	18	5
Very Important	8	9
Total	57	47

TABLE 8

Initial Reason for Placement of Child:

	Frequency Experimental	Control
Physical Abuse	8	7
Neglect	17	13
Sexual Abuse	7	6
Parent-Child Conflict	5	4
Ungovernable Child	13	11
Other Child Behavior	3	2
Other Parent Behavior	4	4
Total	57	47

TABLE 9



The children's involvement with substance abuse was measured. Four experimental children reported some involvement with illicit drugs as compared to five of the control group children.

Prior substitute care placements for those in the experimental group averaged 1.6. Control group children averaged 1.9 prior placements.

The average number of months that the child had been in care prior to entering this project for the experimental group was 12.9. The control group children averaged 13.9 months of out-of-home care.

Experimental group children averaged 69.2 days of being in their own homes during the 90 day time period. Control group children averaged 12.3 days of being in their own homes during this same 90 day time period.

In conclusion it appears hopeful that by using intensive in-home services the reunification of children in substitute care can occur more quickly. Because this 17 month project has demonstrated such success, the Department will continue to use this model for the reunification of children from substitute care. The benefits of such a program are numerous beginning with the child returning to a permanent home in the most timely manner possible, foster care workers have been given a resource to reduce one of many responsibilities they are accountable for and finally the cost benefits of returning children home as soon as possible will be realized. It will be of great interest to all involved as to the number of children who are able to remain in their homes (at the six month follow-up) after receiving intensive in-home reunification-services as compared to regular foster care case management.

In conclusion, it seems apparent that because foster care workers are consumed with managing the crises of children who are placed in substitute care and finding the most time efficient way of having their case records comply with state and federal mandates, that the "art of reunification" has not progressed as quickly as those programs where the focus is on the family rather than the child or the paper work. Although the intention of federal and state mandates are to provide the best possible practice for foster care workers, high caseloads preclude the standards from being met, let alone specific techniques or skills to enhance the process of reunification.

As demonstrated by this small research project, the practice of foster care and reunification can greatly be enhanced if workers are afforded the opportunity to work with families and their children who are placed in substitute care rather than focusing on "best paperwork practice" and putting out fires.

0611f-83-91